

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

| Application Number: | 10/049,306 | |
|-----------------------|-----------------------|--|
| Filing Date: | 06/05/2002 | |
| First Named Inventor: | CATTANEO | |
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| Group/Art Unit: | 1635 | |
| Examiner Name: | Richard SCHNIZER, PhD | |
| Attorney Docket No.: | LLG/2006.01/US | |

| | riist Nameu inventor. | CATTANEO |
|--|---------------------------------------|---------------------------------|
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| | Group/Art Unit: | 1635 |
| | Examiner Name: | Richard SCHNIZER, PhD |
| | Attorney Docket No.: | LLG/2006.01/US |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. | | |
| The requested extension and appropriate non-small-entity fee are as follows (check time period desired): | | |
| ☐ One month (37 CFR 1.17(a) (1)) ☐ Two months (37 CFR 1.17(a) (2)) ☒ Three months (37 CFR 1.17(a) (3)) ☐ Four months (37 CFR 1.17(a) (4)) ☐ Five months (37 CFR 1.17(a) (5)) | \$ \$ \$ 1,0 \$ \$ | 20 |
| | efore, the fee amount shown ab | ove is reduced by one-half, and |
| A check in the amount of the fee is enclosed. | | |
| ☐ Payment by credit card. Form PTO-2038 is attached. | | |
| ☐ The Director has already been authorized the charge fees in this application to a Deposit Account. | | |
| ☐ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number | | |
| I have enclosed a duplicate copy of this sheet. | | |
| I am the applicant/inventor. | | |
| assignee of record of the entire interest. Statement under 37 CFR 3.73(b) is enclosed. | | |
| attorney or agent of record. Registration Number: | | |
| attorney or agent under 37 CFR 1.34(a). | | |
| Registration number if acting under 37 C | FR 1.34(a): 35,355 | |
| WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-\$038. | | |
| 05/3./06 Date Signa | James III | aze_ |
| | neth K. Sharples d or Printed Name | \ *! |
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☐ Total of 1 form is submitted.

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